

# Revisiting How Sport Psychology Can Best Be Illustrated

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## Abstract

In this paper we revisit the question, how can sport psychology best be illustrated? There have been many interesting works produced in recent years that have displayed conversations between sport psychologists and athletes. In our view there are problems in analysing and commenting on transcripts that are not based on real-life psychological practice. Many works have not considered the importance of recording and representing real-life practice, and so have glossed over the original question, how can sport psychology best be illustrated? This has lessened what they can contribute to understanding how sport psychology is practiced. To illustrate this point, we present a short extract of real-life therapy talk that centres on the therapist's question, have you seen a psychologist before? The audio recording of this psychologist-client talk was presented in our conference presentation, and we display transcripts of this therapy talk in three different forms in this paper: a Jeffersonian transcript, a verbatim transcript, and an idealised script. We use data from these transcripts to show that choosing a transcription format has consequences for how we can understand psychological practice.

## Introduction

There has been a growing interest in understanding how we do sport psychology in recent years. Mark Andersen has championed this cause and has produced works that have focused on how service delivery<sup>1</sup> is accomplished. *Doing Sport Psychology* (Andersen, 2000a) and *Sport Psychology in Practice* (Andersen, 2005) are two works that have used examples of sport psychologist-athlete conversations to display aspects of service delivery. Andersen has supplemented these transcripts of talk with comments and interpretations from leading practitioners to make sport psychology practice explicit and more visible.

This approach has been well received in coaching (e.g., Schiffer, 2002), sport psychology (e.g., Morris, 2001), and physical education (e.g., Gaughan, 2001). Together with other works (e.g., Brewer, Van Raalte, & Petitpas, 2000; Giges & Petitpas, 2000), they have helped to establish consultant-client conversations as a

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<sup>1</sup> We shall refer to service delivery, doing sport psychology, and sport psychology practice interchangeably in this paper.

legitimate source data for examining how sport psychology is done in real-life encounters.

Andersen (2000b) begins this work by asking; How can doing sport psychology service best be illustrated? This is the focus of our paper. It is a significant issue that we feel requires further discussion. So in this paper we revisit this issue and use a short extract of real-life therapy talk to raise key points about this question.

We argue that decisions about how to represent sport psychology practice impacts on both the data that you have available to examine service delivery, and the analytic resources that that you can draw upon to understand these professional interactions.

## Therapy Talk

The forthcoming data is the opening 40 seconds of talk between a psychologist<sup>2</sup> and a client<sup>3</sup> and was recorded by the psychologist and then transcribed by the first author. This therapy talk is represented in three different forms so that we can illustrate how real-life psychology practice can be examined.

## Jeffersonian Transcript

Extract 1 displays a Jeffersonian transcript of this opening to the therapy talk. The line numbers shown in the first column display the serial nature of the conversation. The labels (i.e., P or C) in the second column show which participant is talking during the conversation. The text in the third column shows the talk that is produced by a participant.

Extract 1 displays the verbatim speech between these two participants and some of the paralinguistic features (e.g., pronounced in-breaths) used by them to produce this talk. These features are important because they allow us to document some of the more subtle elements of this conversation, and provide data for a more fine-grained analysis of the interaction. The transcript uses some of the conventions established by Gail Jefferson<sup>4</sup>

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<sup>2</sup> The psychologist is provisionally registered and this data is from material that was recorded for a skills-based post-graduate course.

<sup>3</sup> A pseudonym is being used.

<sup>4</sup> See pages ix-xvi in Atkinson and Heritage (1984) to see an annotated illustration of these transcription conventions.

to convey these paralinguistic features in text. These conventions are displayed in Appendix A.

A consequence of adopting this transcription format is that an analyst can draw upon over 40 years of conversation analysis research as analytic resources for understanding this interaction<sup>5</sup>.

Extract 1: Opening the Conversation (Jeffersonian version)

Participants: Psychologist (P), Client (C)

0 ((record button pressed))  
1 P: Good morning Lane how are you?  
2 C: Pretty good.  
3 P: Oh that's good.  
4 P: .hhh Lane u:hm you've come to see me today  
5 and there's just a few things that we need to  
6 discuss before we get into our session.  
7 C: U:huh=  
8 P: =Ok.  
9 P: .hhh u:hm One of the things that we need  
10 to talk about is the role of the psychologist.  
11 Have you ever been to see a psychologist before?  
12 (0.6)  
13 C: .t.hh No=  
14 P: =No ok=  
15 P: =Do you  
16 P: are you comfortable with what a psychologist  
17 do you have any idea what a psychologist does?  
18 C: No=  
19 P: =No ok.  
20 P: .hhh Well a psychologist is different to u:hm  
21 a:h psychiatrist for example in that we don't  
22 prescribe medication .hhh but we talk about  
23 problems and we come up with treatment  
24 plans and ways to help you .hhh u:hm and  
25 .t.hhh so on and so forth.  
26 P: Is that are you ok with that?  
27 C: U:huh=  
28 P: =Ok.  
29 (0.4)

### Verbatim Transcript

Extract 2 displays a verbatim transcript of the therapy talk. Note how this focuses on the words spoken in the original conversation. This produces a transcript in standard orthographic English without the paralinguistic features that characterise this real-life interaction. For instance, the full stops have been removed as they signal a downward and closing intonation in the Jeffersonian version. We have kept the original line numbers in this transcript to allow a ready comparison with Extract 1.

Producing a verbatim version using Standard English orthography and omitting the paralinguistic features has some unintended consequences. Firstly, it homogenises the temporal nature of the interaction by implying that the duration between one speaker finishing speaking

and the next speaker beginning to talk (i.e., speaker transitions) was equivalent throughout the interaction. Readers could then reasonably infer from this transcript that speaker transitions were unproblematic in this therapy talk. Secondly, it dilutes some of the emotional character of the original conversation. That is, it does not distinguish between segments of talk that might have been produced faster or slower, or spoken more loudly or in a whispered voice. So it subtly invites the reader to use his or her personal knowledge as skilled conversationalists or their professional knowledge and experience from working within this or similar settings to infer about the nature of this interaction. Thus a verbatim transcript presents a somewhat impoverished version of the original conversation, which readers' implicitly try to upgrade.

Extract 2: Opening the Conversation (Verbatim version)

Participants: Psychologist (P), Client (C)

1 P: Good morning Lane how are you?  
2 C: Pretty good  
3 P: Oh that's good  
4 P: Lane you've come to see me today  
5 and there's just a few things that we need to  
6 discuss before we get into our session  
7 C: Yes  
8 P: Ok  
9 P: One of the things that we need  
10 to talk about is the role of the psychologist.  
11 Have you ever been to see a psychologist before?  
12  
13 C: No  
14 P: No Ok  
15 P: Do you  
16 P: are you comfortable with what a psychologist  
17 do you have any idea what a psychologist does?  
18 C: No  
19 P: No ok  
20 P: Well a psychologist is different to  
21 a psychiatrist for example in that we don't  
22 prescribe medication. But we talk about  
23 problems and we come up with treatment  
24 plans and ways to help you and  
25 so on and so forth.  
26 P: Is that are you ok with that?  
27 C: Yes  
28 P: Ok  
29

### Idealised Transcript

Extract 3 displays an ideal version of the therapy talk. This produces a script of how we might typically expect a psychologist and a client to open a therapy session. Note how Standard English orthography and grammar have been used to produce a scripted formulation of this therapy talk. The line numbers are redundant and have been removed from the transcript.

Using Standard English orthography and grammar to produce a scripted version has some unintended

<sup>5</sup> Conversation Analysis has origins in Harvey Sacks lectures on conversation in the mid-1960's (see Sacks, 1992/1995).

consequences. Firstly, it implicitly invites the readers to use these same resources to understand the interaction. Secondly, it infers that speakers in real-life conversations use these resources to produce meaning and convey understanding in their interactions. Thirdly, it promotes a structuralist view of language and so undermines a contemporary social view of language (see Kress, 2001, for a review).

Extract 3: Opening the Conversation (Idealised version)  
 Characters: Psychologist (P), Client (C)

- P: Good morning, Lane. How are you?  
 C: Pretty good, thank you, Alice.  
 P: There are just a few things that we need to discuss before we begin our session today.  
 C: Yes, Alice.  
 P: One of the things that we need to talk about is the role of the psychologist.  
 C: Yes.  
 P: Have you ever been to see a psychologist before?  
 C: No, I haven't.  
 P: Do you have any idea what a psychologist does?  
 C: No, not really.  
 P: Well a psychologist is different from a psychiatrist. A psychologist does not prescribe medication to a client but instead talks to them about their problems and comes up with a recommended solution to them in the form of a treatment plan.  
 C: Oh, is that what a psychologist does?  
 P: Yes.  
 P: Are you ok with that, Lane?  
 C: Yes, I am Alice. Thank you.

### Analysis

While there is much that we could find interesting in these three extracts we wish to focus on one question-answer pair produced by the psychologist and the client, respectively. In Line 11 P asks, *have you ever been to see a psychologist before?* C's response follows in the next turn to talk.

The three transcripts provide different levels of data that we can use to examine this professional interaction. The following analysis shows how transcription choices shape what you can understand from a psychologist-client interaction.

### Jeffersonian Transcript

Extract 4: Seen a Psychologist (Jeffersonian version)  
 Participants: Psychologist (P), Client (C)

- 11 P: Have you ever been to see a psychologist before?  
 12 (0.6)  
 13 C: .t.hh No=  
 14 P: =No ok=

The question-answer pair is displayed in Extract 4 using Jeffersonian notation. P asks a Yes-No Interrogative question in Line 11. C replies with a type-conforming

response, *No*, in Line 13<sup>6</sup>. P acknowledges this with, *No ok*, in Line 14. Thus the transcript shows the speakers conform to the normative rules for turn-taking during talk by producing orderly talk without overlap or interruption. That is, one person speaks at a time (see Sacks, Schegloff, & Jefferson, 1974).

P responds immediately in Line 14 to produce an acknowledgement that is latched to C's answer. Equal signs display this latching in the transcript, showing that there is very little delay between one utterance finishing and the next utterance starting across Lines 13-14. The transcript shows the speakers conform to the normative principles of turn-taking by producing transitions with little or no gap in the conversation (see Sacks, Schegloff, & Jefferson, 1974). Except for Line 13 where there is a delay in starting a response.

However we are interested in the data that preceded C's answer since it provides valuable information on how C treated P's question.

The pause at Line 12 and the tch sound and audible in-breath produced by C at Line 13 are interesting features of this interaction. Sacks (1987) noted two features of answer design in talk. Firstly, speakers maximise the response cohesion and indexical dependency of their answers. Secondly, speakers maximise contiguity by making responses start as soon as possible after a question. The transcript shows C producing an indexical or type conforming answer but only after a delay and brief hedge. C's response adheres to Sacks' first rule but breaches his second normative rule for answer design.

Discursive psychology resists using language to infer about a speaker's mental processes (Edwards & Potter, 2001). So we are not interested in using the discourse in Extract 4 to infer about C's cognitive state at this moment in the conversation. Instead we are concerned with how C treated P's question in a discursive sense.

Pomerantz (1984) explains that a preferred second (e.g., an answer to a question; accepting an invitation) is usually produced immediately, unmarked and without an account by a speaker. Whereas a dispreferred second or response (i.e., not answering a question; declining an invitation) is typically produced after a delay, is marked (e.g., beginning with "Well"), has some softening talk, and an account for the stance offered by the speaker. Pomerantz explains that these features allow us to recognise instances of troubled talk in a conversation.

The paralinguistic features provided by a Jeffersonian transcription allow us to make analytic claims about the nature of the talk in Lines 11-14 that are not possible using the data that is available in either Verbatim or Idealised Transcripts.

For instance, it permits the analytic claim that C treats P's question, *have you ever been to see a*

<sup>6</sup> See Raymond (2003) for a description of the features that characterise YNI questions and type-conforming responses.

*psychologist before*, as potentially troubling. The 0.6 second delay, tch sound, and audible in-breath signal C's trouble in formulating a response to this YNI question. This data immediately precedes C's answer and follows P's question, and so can be treated a feature of this question-answer pair. The presence and position of this data in the Jeffersonian transcript is central to this analytic claim about troubled talk. Note how this data is not captured by the verbatim transcription or contained in the idealised script of Extract 5 and Extract 6.

So what might this observation mean for service delivery aspects? The psychologist's response on Line 14 indicates that they have not oriented to the client's answer on Line 13 as a sign that the client is potentially troubled by the psychologist's initial question. In other health settings, not orienting to or picking up on what is problematic for patients has been argued to impact upon patient satisfaction, treatment compliance, and the therapeutic relationship (Heritage & Maynard, 2006).

### Verbatim Transcript

Extract 5: Seen a Psychologist (Verbatim version)  
Participants: Psychologist (P), Client (C)

11 Have you ever been to see a psychologist before?  
12  
13 C: No  
14 P: No Ok

### Idealised Transcript

Extract 6: Seen a Psychologist (Idealised version)  
Participants: Psychologist (P), Client (C)

P: Have you ever been to see a psychologist before?  
C: No, I haven't.

The claim that C finds this a troubling question is not undermined by the data that follows this segment of interaction. C produces a type-conforming answer, *No*, to the question, which P acknowledges immediately. P's immediate response treats this answer as a preferred response to this question. Rather than undermining the analytic claim that C finds this to be a troubling question, the answer and the acknowledgement raise other interesting questions about this nature of this interaction<sup>7</sup>.

The central point of this brief conversational analysis is to make the claim that an analyst could not raise these or similar matters about this therapy talk using Extract 5 (i.e., a verbatim transcript) or Extract 6 (i.e., an idealised script) as the data does not permit this level of fine-grained analysis<sup>8</sup>.

<sup>7</sup> See Christensen and Lamont-Mills (2007) for discussion on some of these matters.

<sup>8</sup> See Hutchby and Wooffitt (1998) for an introduction to the principles and practices of conversation analysis.

## Conclusion

In this paper we have turned our attention to Andersen's original question, how can doing sport psychology service best be illustrated? We feel that the sport psychology community needs to revisit this issue and consider the strengths and shortcomings of different transcriptions formats. We have illustrated this using a short but ordinary segment of therapy talk. It shows that these decisions impact upon how we can understand an interaction, and the types of analytic resources that we can use to examine a professional interaction so shaping our knowledge base about service delivery. We feel that it is timely to consider these matters since the published works provide a good starting point but any further progress will require us to strengthening our data and analytic processes.

## Appendix A

Some Transcription Conventions (Jefferson, 1984).

: An utterance is prolonged or elongated.  
= Signals talk that is latched to a previous turn.  
(.) A brief untimed pause less than 0.2 seconds.  
(0.4) A 0.4 second pause in conversation.  
.hhh An audible in-breath.  
.t.hhh A tch sound followed by an audible in-breath.  
°text° Whispered or reduced volume speech.  
((text)) Annotated text provided by the transcriber.

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## Additional Information

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